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FORM	First Named Inventor	Donald R. Titterir	ngton, Ph.O.	CENTRAL FAX CEN				
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	ENCLOSURES (Check all t	hat apply)						
Fee Transmittal Form	Drawing(s)		After Allo	wance Communication to TC				
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Affidavits/declaration(s)	Power of Attorney, Revocation							
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Extension of Time Request	Terminal Disclaimer	لبا	below):	RECEIVED				
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Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is hereby authorized which may be required by this paper to	d to charge any Deposit Accoun	fees under 37 nt No. 24-003	7 C.F.R. 1.16 and 1.17 7.				
SIGNA	TURE OF APPLICANT, ATTOR	NEY. OR AG	ENT					
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date shown below:	eing facsimile transmitted to the USPTO o relope addressed to: Commissioner for Pa	or deposited with atents, P.O. Box	h the United S k 1450, Alexa	States Postal Service with andria, VA 22313-1450 on				
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ped or printed name Racquel M. Esplii	···· <del>·</del>		Date Sept	lember 23, 2005				

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818),					Complete if Known						
FEE TRANSMITTAL For FY 2005			Applicati	on Number	10/804,42	0/804,425					
			Filing Da	ite	March 18, 2004						
			First Nan	ned Inventor	Donald R.	Tittering	ton, Ph.D.				
Applicant claims small entity status. See 37 CFR 1.27				Examine	Examiner Name R. Serg			ergent			
<del></del>				Art Unit	Art Unit 1711			11			
TOTAL AMOUNT OF PAYMENT (\$) 130.00				Attomey	Attorney Docket No. D/A0306IID1						
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 24-0037 Deposit Account Name: Xerox Corporation											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
✓ Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except fee  Charge fee  Charge fee  Charge fee  Charge fee  Charge fee  Char											
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FEE CALCULA	<del></del>										
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HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x = 0											
4. OTHER FEE(\$) Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)											
Other (e.g., late filing surcharge): Terminal Disclaimer 130.00											
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(Attorney/Agent) 44,854 James Lake Name (Print/Type) 23 Sen 2205 Date

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